

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Citizens for Julia L. Dorrian</b>					
Full Name of Contributor <b>Gregory N. Finnerty</b>				Registration Number, if PAC	
Street Address <b>6013 Round Tower Lane</b>	Employer/Occupation/Labor Organization* <b>Attorney; lawfirm</b>		M <b>0</b>	D <b>9</b>	Y <b>0</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43017</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Sean H. Maxfield</b>				Registration Number, if PAC	
Street Address <b>825 S. Front St.</b>	Employer/Occupation/Labor Organization* <b>Attorney; lawfirm</b>		M <b>0</b>	D <b>9</b>	Y <b>0</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43206</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Philip J. Kaufman</b> (Ct appointee receiving agg. comp in excess of \$250 in current or prev. 6 years)				Registration Number, if PAC	
Street Address <b>341 South 3rd Street, Suite 300</b>	Employer/Occupation/Labor Organization* <b>Attorney; lawfirm</b>		M <b>0</b>	D <b>9</b>	Y <b>0</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Thomas F. Hayes</b> (Ct appointee receiving agg. comp in excess of \$250 in current or prev. 6 years)				Registration Number, if PAC	
Street Address <b>65 E. Livingston Avenue</b>	Employer/Occupation/Labor Organization* <b>Attorney; lawfirm</b>		M <b>0</b>	D <b>9</b>	Y <b>0</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Cleve M. Johnson</b>				Registration Number, if PAC	
Street Address <b>495 S. High Street, Suite 400</b>	Employer/Occupation/Labor Organization* <b>Attorney; lawfirm</b>		M <b>0</b>	D <b>9</b>	Y <b>0</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Woody Fox Sr.</b>				Registration Number, if PAC	
Street Address <b>289 South 3rd Street</b>	Employer/Occupation/Labor Organization* <b>Wood Fox Bail Bonds</b>		M <b>0</b>	D <b>9</b>	Y <b>0</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Cash</b>		Amount <b>100.00</b>
Full Name of Contributor				Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M	D	Y
City	State	Zip Code	Form(Cash,Check,etc)		Amount

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. [R.C. 3517.10(B)(4)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column.

Total contributions this event

**4,900.00**

Total expenditures this event

**1,643.28**

Page Total \$ 600.00